CHAIN-OF-CUSTODY / Analytic The Chain-of-Custody is a LEGAL DOCUMENT.

PM: MMW

W0#:1282659

CLIENT: USS CORP Due Date: 02/22/17

							100 mg/m				00	0.5 1.4	io)	Ğ				ITEM #		Requested Due Date:	Phone:	Email:	Mt. Iron, MN 55768	Company:	Section A Required (
						SENSE WROCE TANDITIES OF THE SENSE										WS-003 Thickner Overflow	WS-002 Scrubber Make-Up	SAMPLE ID One Character per box. (A-Z, 0-9 /, -) Sample (ds must be unique		Due Date:	Fax		N 55768	USS Corporation	Section A Required Client Information:
																		Driehling Wetter DWV Water WIT Wasse Water WWV Product P Product SL Oil OL Oil Wipe WP Air AR OUT Tessue TS		Project#	Project Name:	Purchase Order #;	cupy 10.	Report To:	Section B Required Project Information:
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SIGNATURE of SAMPLER:					`	100-54F										(19 LO	24.510	END DATE .	COLLECTED	. .	_				
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					9.													# OF CONTAINERS Unpreserved		Pace F	ace F	Jace (Address:	Attention:	Section C Invoice Int
8	Paul nuss			-	16:25	독 교				+	╁		+			 	H2SO4		rofile	Pace Project Manager:	Quote:	Address:	Non:	Section C Invoice Information:	
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Routes					1													HCI NaOH	Preservativ		ger				ļš.
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Document Name:

Sample Condition Upon Receipt Form

Document No.: F-VM-C-001-Rev.09 Document Revised: 23Feb2015

Page 1 of 1

Issuing Authority: Pace Virginia, Minnesota Quality Office

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Sample Conditio	n Client Name:	Cone

Sample Condition Client Name: Upon Receipt			Den!e-4	W0#∶1282659					
Courier: Fed Ex UPS Commercial Pace	USPS			PM: MMW Due Date: 02/22/17 CLIENT: USS CORP					
Tracking Number:									
Custody Seal on Cooler/Box Present?	r No	Seals In	ntact? [Yes No Optional: Proj. Due Date: Proj. Name:					
Packing Material: Bubble Wrap Bubble Bag	s 🗆	lone	Other:_	Temp Blank? ☐Ŷes ☐No					
Thermometer Used: 🖊 140792808	Type of	Ice:	Wet [Blue None Samples on ice, cooling process has begun					
Cooler Temp Read °C: 1.7 Cooler Temp Co			2 ₀○ Date and	Biological Tissue Frozen? Yes No NA d Initials of Person Examining Contents: 7-8-17 MT					
				Comments:					
Chain of Custody Present?	Yes	□No	□N/A	1.					
Chain of Custody Filled Out?	□¥es	□No	□N/A	2.					
Chain of Custody Relinquished?	 □xes	□No	□N/A	3.					
Sampler Name and Signature on COC?	Yes	□No	□N/A	4.					
Samples Arrived within Hold Time?	□Yes	□No	□N/A	5.					
Short Hold Time Analysis (<72 hr)?	Yes		□N/A	6.					
Rush Turn Around Time Requested?	□Yes		□N/A	7.					
Sufficient Volume?	[⊅Yes	□No	□N/A	8.					
Correct Containers Used?	✓Yes	□No	□N/A	9.					
-Pace Containers Used?	⊠Yes	□No	□n/A						
Containers Intact?	✓Yes	□No	□N/A	10.					
Filtered Volume Received for Dissolved Tests?	✓Yes	□No	□N/A	11. Note if sediment is visible in the dissolved containers.					
Sample Labels Match COC?	[⊒Yes	□No	□N/A	12.					
-includes Date/Time/ID/Analysis Matrix:	1		<u></u>						
All containers needing acid/base preservation will be checked and documented in the pH logbook.	Yes	□No	ZN/A	See pH log for results and additional preservation documentation					
Headspace in Methyl Mercury Container	☐Yes	□No	ØN/A	13.					
Headspace in VOA Vials (>6mm)?	Yes	□No	Z⁄N/A	14.					
Trip Blank Present?	Yes	□No	ØŅ/A	15.					
Trip Blank Custody Seais Present?	Yes	□No	ØN/A						
Pace Trip Blank Lot # (if purchased):				·					

CLIENT NOTIFICATION/RESOLUTION	Field D	ata Required? Yes No
Person Contacted:	Date/Time:	
Comments/Resolution:		- N
	77 4 6 6	

FECAL WAIVER ON FILE

TEMPERATURE WAIVER ON FILE

Project Manager Review:

Date:

Date:

Date:

Date:

Date:

Date:

Date:

Note: Whenever there is a discrepancy affecting North Carolina compliance samples, a copy of this form will be sent to the North Carolina DEHNR Certification Office (i.e. out of hold, incorrect preservative, out of temp, incorrect containers)